

Will Indemnity Closure Form

Complete this form if the deceased account holder has left a will and you are appointed executor to their estate. The total balance of all of the accounts held with the Society, in only the deceased's name, must be less than £30,000.

If the total balance exceeds £30,000 you will need a Grant of Probate instead of this form.

As an executor you must act in accordance with the duties of your executor's oath and distribute the estate to the beneficiaries in accordance with the deceased's will.

By signing this form you will close the deceased's account(s) with the Society and agree to indemnify the Society from and against all claims and demands of the funds from any other person, in respect of closure of the deceased's account(s).

A cheque for each of the account balances shall be made payable to the executor who signs this form in section E below. Except where, on production of the appropriate evidence, the cheque is for funeral expenses or Inheritance Tax and is made payable to HM Revenue and Customs.

If there is more than one executor signing this form, a cheque will be made payable in both names.

. Details of the Deceased		
Forename(s)	Account	
	Numbers	
Surname		
Date of death	,	
Date of death /		
. Name(s) and Address(es) of execut	tor(s) completing and signing this form	
Forename(s)	Forename(s)	
Surname	Surname	
Address	Address	
Postcode	Postcode	
Relationship to the deceased	Relationship to the deceased	
C.1. Please tick the correct statement below:	(and cross out the 'I do/ 'I am' or 'We do' / 'We are' as appropriate)	
· ·	that I am / We are the appointed executor(s) in the deceased's will and	d there are not
other appointed executors Move on to secti C.1		
I do / We do solemnly and sincerely declare t	that I am one of / We are two of the executors appointed in the deceases of any other executor(s), and their relationship to the deceased, in the	
[Other executor name:	Relationship to deceased:	
[Other executor name::	Relationship to deceased:	
Move on to section C.2.		
C.2 (cross out the 'I' or 'We' as appropriate)		
I / We hereby request the Society to close the abound total balance not exceeding £30,000.	ove account(s) and transfer to me / us the balance in each account by	cheque,
I / We hereby undertake to indemnify the Society f any other person in respect of the closure of the ar	from and against all claims and demands against the funds of the Socaccount(s) held by the deceased detailed above.	iety from
I / We attach or have already provided the Society	with an original or certified copy of the death certificate of the decease	sed.
I / We attach or have already provided the Society	with an original or certified copy of the will of the deceased.	
I / We make the solemn declaration conscientious Statutory Declarations Act 1835.	sly believing the same to be true and by virtue of the provisions of the	

D. Signature(s) of executor(s) completing this form					
Signature		Signature			
Date	1 1	Date	/ /		
E. Declaration (to be completed by Commissioner	for Oaths / Soli	citor Empowered to Administer Oaths)		
Declared at		Forename(s)			
In County of		Surname			
Date	/ /	Address			
Signature					
Guidance Notes for Completion					
This information will guide you through the requirements for completing this form. It's important the form is completed in full. If any of the sections are incomplete or completed incorrectly, we may have to return the form to you, which will delay the release of funds. Complete all sections providing details of the deceased, the deceased's account(s) held with the Society, your details and those of any other executor(s) to the deceased's estate.					

Section A

Any monies in accounts held in joint names with the deceased will automatically be transferred to the name(s) of the surviving account holder(s). **Don't include details of such accounts on this form.**

Section B

This section is for the details of the executor(s) completing the form only.

Not all eligible executor(s) need to complete the form, provided that all other executor(s) are noted in section C.1.

The cheque for funds on closure of the account will be made payable to the executor(s) noted in sections B and C.1.

Section C

C.1. The correct declaration statement should be ticked (crossing out the 'I do' or 'We do' as appropriate).

If there is an eligible executor who isn't signing the form, please list their name(s) and relationship to the deceased in the box provided.

C.2. Cross our the 'I' or 'We' on each statement as appropriate.

Please note we need the original or a certified copy of the will.

Section D

Only executor(s) completing this form need to sign and date in this section.

Any executor(s) mentioned in Section C.1 do not need to sign.

Section E

A Commissioner for Oaths or solicitor empowered to administer oaths must witness and sign the form where the balance, including accrued interest, is £1,500 or above (up to a maximum of £30,000) before returning it to us.

If the total amount of the account balances is less than £1,500, a solicitor isn't required to sign.

Important Note

Legislation allows the Society to release the funds without probate or grant of letters of administration (please note our maximum limits above) where the person(s) signing provides a statutory declaration.

This declaration has to be checked, completed and signed by a Commissioner for Oaths or solicitor empowered to administer oaths as indicated on the form. This is a compulsory requirement and the Society will not release funds without this.

The final decision of whether or not to release the funds is entirely at the Society's discretion. Any request to release funds over £1,500 will not be considered unless sections D and E are duly completed.

Further Assistance

If you require assistance to complete this form or need any further information, please contact your local branch. You can also call our Service Excellence team on 01325 366366 between the hours of 9am to 5pm, Monday – Friday, and 9am to 12pm on Saturdays.